

## BNL TUITION ASSISTANCE REQUEST

Please fill out this form and forward it to the Tuition Office, Bldg. 185. This form must be submitted prior to taking a course. An official grade report and a copy of a bursar's receipt or a canceled check for the total amount of tuition paid must be submitted within 12 months of course completion in order for your reimbursement to be processed. Maximum tuition assistance for full time employees is nine credits or \$4,000 per semester for three semesters per calendar year.

If you are requesting a tuition advance, checks will be issued as necessary. Any payments made are considered advances until receipts for tuition and grade reports are submitted to the Tuition Office. **These must be submitted within 60 days of course completion.** If you drop or withdraw from a class, you must pay back the advance immediately. If you receive a grade of "incomplete," you will be allowed one additional term to complete the course satisfactorily, otherwise immediate repayment is required.

Name \_\_\_\_\_ Life No. \_\_\_\_\_ Dept. Code \_\_\_\_\_ Bldg. \_\_\_\_\_ Ext. \_\_\_\_\_

Job Title \_\_\_\_\_ Full or Part Time \_\_\_\_\_ Term Employee End Date \_\_\_\_\_

School \_\_\_\_\_ Registration Date \_\_\_\_\_

Please circle Semester: Spring Summer Fall Other (please indicate) \_\_\_\_\_ Year \_\_\_\_\_

(1) Course No: \_\_\_\_\_ Course Name: \_\_\_\_\_ Tuition Fee Per Credit: \$ \_\_\_\_\_

Day(s) of Course \_\_\_\_\_ Time of Course \_\_\_\_\_ No. Credits \_\_\_\_\_ Total Tuition Fee: \$ \_\_\_\_\_

(2) Course No: \_\_\_\_\_ Course Name: \_\_\_\_\_ Tuition Fee Per Credit: \$ \_\_\_\_\_

Day(s) of Course \_\_\_\_\_ Time of Course \_\_\_\_\_ No. Credits \_\_\_\_\_ Total Tuition Fee: \$ \_\_\_\_\_

(3) Course No: \_\_\_\_\_ Course Name: \_\_\_\_\_ Tuition Fee Per Credit: \$ \_\_\_\_\_

Day(s) of Course \_\_\_\_\_ Time of Course \_\_\_\_\_ No. Credits \_\_\_\_\_ Total Tuition Fee: \$ \_\_\_\_\_

**ARE THESE COURSES FOR A DEGREE, WHAT DEGREE?** \_\_\_\_\_ **MAJOR FIELD** \_\_\_\_\_

Please indicate any type of educational benefits (veterans, scholarship, others) you may receive and the amount \_\_\_\_\_

**DO YOU REQUEST A TUITION ADVANCE?** \_\_\_\_\_ **IF YES, AMOUNT FOR TUITION ADVANCE \$** \_\_\_\_\_

**PAYABLE TO** \_\_\_\_\_ **F/B/O (for the benefit of)** \_\_\_\_\_

**Name of School**

**Print Your Name**

Employee should note that as a condition of issuance of the advance, Brookhaven National Laboratory reserves the right to withhold the full amount of the advance from the paycheck of the employee to whom the advance was made, if the use of funds has not been adequately accounted for, i.e. satisfactory grade reports and all receipts submitted, within (60) days after the completion date of the course. If the employee terminates before completing the course work, the advance is due immediately and may be withheld from any terminal paycheck.

Employees Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: THE COURSE(S) MUST BE PERTINENT TO THE WORK THAT THE EMPLOYEE IS DOING OR MAY REASONABLY BE EXPECTED TO DO OR THAT IS REQUIRED FOR A DEGREE IN A FIELD OF STUDY PERTINENT TO THE WORK OF THE LABORATORY.**

Supervisors Approval \_\_\_\_\_ Date \_\_\_\_\_ Dept. Approval \_\_\_\_\_ Date \_\_\_\_\_

### FOR USE BY TUITION REFUND COMMITTEE

**Curriculum Approved** \_\_\_\_\_ **Disapproved** \_\_\_\_\_ **Employee Notified** \_\_\_\_\_

**Comments** \_\_\_\_\_

**Advance Approved** \_\_\_\_\_ **Accounting Notified** \_\_\_\_\_ **Percentage of Tuition Allowable** \_\_\_\_\_

**Check distributed to Employee** \_\_\_\_\_ **Check Date** \_\_\_\_\_ **Completed Course No.** \_\_\_\_\_

**Grade** \_\_\_\_\_ **Completed Course No.** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Completed Course No.** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Total Tuition Charges \$** \_\_\_\_\_ **Reimbursement Charges \$** \_\_\_\_\_ **Date** \_\_\_\_\_

**Tuition Advance Account Reconciled/Reimbursement Approved** \_\_\_\_\_